



ANNUAL STATEMENT
For the Year Ending December 31, 2007
OF THE CONDITION AND AFFAIRS OF THE
Health Plan of Michigan, Inc.

NAIC Group Code	0000 (Current Period)	,	0000 (Prior Period)	NAIC Company Code	52563	Employer's ID Number	38-3253977
Organized under the Laws of	Michigan			State of Domicile or Port of Entry	Michigan		
Country of Domicile	United States of America						
Licensed as business type:	Life, Accident & Health[] Dental Service Corporation[] Other[]		Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[] No[X] N/A[]		Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[X]		
Incorporated/Organized	12/31/1995			Commenced Business	12/31/1995		
Statutory Home Office	777 Woodward Ave. Suite 600 (Street and Number)			Detroit, MI 48226 (City or Town, State and Zip Code)			
Main Administrative Office	777 Woodward Ave. Suite 600 (Street and Number)			Detroit, MI 48226 (City or Town, State and Zip Code)			
Mail Address	777 Woodward Ave. Suite 600 (Street and Number or P.O. Box)			Detroit, MI 48226 (City or Town, State and Zip Code)			
Primary Location of Books and Records	Same, (City or Town, State and Zip Code)			Same (Street and Number)			
Internet Website Address	www.hpmmich.com			(313)324-3700 (Area Code) (Telephone Number)			
Statutory Statement Contact	Jon B. Cotton (Name) jcotton@hpmmich.com (E-Mail Address)			(313)324-3705 (Area Code)(Telephone Number)(Extension) (313)202-0075 (Fax Number)			

OFFICERS

Name	Title
David B. Cotton M.D.	President/CEO
Thomas Lauzon	Secretary/CIO
Janice Torosian	Treasurer/CFO

OTHERS

DIRECTORS OR TRUSTEES

George Ellis
Thomas Lauzon
Kimberly Harper #

State of Michigan
County of Wayne ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature) David B. Cotton, M.D.	(Signature) Thomas Lauzon	(Signature) Janice Torosian
(Printed Name) 1. President	(Printed Name) 2. Secretary	(Printed Name) 3. Treasurer
(Title)	(Title)	(Title)
Subscribed and sworn to before me this day of , 2008	a. Is this an original filing? b. If no, 1. State the amendment number 2. Date filed 3. Number of pages attached	Yes[X] No[]
(Notary Public Signature)		

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
NONE						
0599999 Accident and health premiums due and unpaid (Page 2, Line 13)						

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199998 Pharmaceutical Rebate Receivables - Not Individually Listed						
0199999 Subtotal - Pharmaceutical Rebate Receivables						
0299998 Claim Overpayment Receivables - Not Individually Listed						
0299999 Subtotal - Claim Overpayment Receivables						
0399998 Loans and Advances to Providers - Not Individually Listed						
0399999 Subtotal - Loans and Advances to Providers						
0499998 Capitation Arrangements Receivables - Not Individually Listed						
0499999 Subtotal - Capitation Arrangements Receivables						
0599998 Risk Sharing Receivables - Not Individually Listed						
0599999 Subtotal - Risk Sharing Receivables						
Other Receivables						
State of Michigan - Maternity Case Rate	2,169,563					2,169,563
State of Michigan/First Health Psychotropic Drug Carveout Reimbursement	489,872					489,872
0699998 Other Receivables - Not Individually Listed						
0699999 Subtotal - Other Receivables	2,659,435					2,659,435
0799999 Gross health care receivables	2,659,435					2,659,435

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Individually Listed Claims Unpaid						
RxAmerica Pharmacy	2,374,785					2,374,785
0199999 Total - Individually Listed Claims Unpaid	2,374,785					2,374,785
0299999 Aggregate Accounts Not Individually Listed - Uncovered						
0399999 Aggregate Accounts Not Individually Listed - Covered	111,845					111,845
0499999 Subtotals	2,486,630					2,486,630
0599999 Unreported claims and other claim reserves						28,197,615
0699999 Total Amounts Withheld						
0799999 Total Claims Unpaid						30,684,245
0899999 Accrued Medical Incentive Pool and Bonus Amounts						1,629,743

21 Exhibit 5 - Amounts Due From Parent NONE

22 Exhibit 6 - Amounts Due to Parent NONE

EXHIBIT 7 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

		1	2	3	4	5	6
Payment Method		Direct Medical Expense Payment	Column 1 as a % of Total Payments	Total Members Covered	Column 3 as a % of Total Members	Column 1 Expenses Paid to Affiliated Providers	Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:							
1.	Medical groups	48,537,951	18.689				48,537,951
2.	Intermediaries						
3.	All other providers						
4.	Total capitation payments	48,537,951	18.689				48,537,951
Other Payments:							
5.	Fee-for-service	40,781,856	15.703	X X X	X X X		40,781,856
6.	Contractual fee payments	166,663,241	64.172	X X X	X X X		166,663,241
7.	Bonus/withhold arrangements - fee-for-service			X X X	X X X		
8.	Bonus/withhold arrangements - contractual fee payments	3,729,964	1.436	X X X	X X X		3,729,964
9.	Non-contingent salaries			X X X	X X X		
10.	Aggregate cost arrangements			X X X	X X X		
11.	All other payments			X X X	X X X		
12.	Total other payments	211,175,061	81.311	X X X	X X X		211,175,061
13.	Total (Line 4 plus Line 12)	259,713,012	100.000	X X X	X X X		259,713,012

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1	2	3	4	5	6
NAIC Code	Name of Intermediary	Capitation Paid	Average Monthly Capitation	Intermediary's Total Adjusted Capital	Intermediary's Authorized Control Level RBC
NONE					
9999999			X X X	X X X	X X X

EXHIBIT 8 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

		1	2	3	4	5	6
Description		Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1.	Administrative furniture and equipment .....	.....	.....	.....	.....	.....	.....
2.	Medical furniture, equipment and fixtures	N O N E		.....	.....	.....	.....
3.	Pharmaceuticals and surgical supplies .....			.....	.....	.....	.....
4.	Durable medical equipment .....			.....	.....	.....	.....
5.	Other property and equipment .....			.....	.....	.....	.....
6.	Total .....	.....	.....	.....	.....	.....	.....



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION: 2. LOCATION:
BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR
NAIC Group Code NAIC Company Code 52563

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	119,149								119,149	
2. First Quarter	125,602								125,602	
3. Second Quarter	129,334								129,334	
4. Third Quarter	130,550								130,550	
5. Current Year	133,250								133,250	
6. Current Year Member Months	1,545,122								1,545,122	
Total Member Ambulatory Encounters for Year:										
7. Physician	1,393,047								1,393,047	
8. Non-Physician	1,087,435								1,087,435	
9. Total	2,480,482								2,480,482	
10. Hospital Patient Days Incurred	41,138								41,138	
11. Number of Inpatient Admissions	11,630								11,630	
12. Health Premiums Written (b)	330,156,070								330,156,070	
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned	330,773,287								330,773,287	
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	259,713,012								259,713,012	
18. Amount Incurred for Provision of Health Care Services	273,737,981								273,737,981	

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0.
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION: 2. LOCATION:		BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR								NAIC Company Code 52563	
NAIC Group Code		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3								
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:											
1.	Prior Year	119,149								119,149	
2.	First Quarter	125,602								125,602	
3.	Second Quarter	129,334								129,334	
4.	Third Quarter	130,550								130,550	
5.	Current Year	133,250								133,250	
6.	Current Year Member Months	1,545,122								1,545,122	
Total Member Ambulatory Encounters for Year:											
7.	Physician	1,393,047								1,393,047	
8.	Non-Physician	1,087,435								1,087,435	
9.	Total	2,480,482								2,480,482	
10.	Hospital Patient Days Incurred	41,138								41,138	
11.	Number of Inpatient Admissions	11,630								11,630	
12.	Health Premiums Written (b)	330,156,070								330,156,070	
13.	Life Premiums Direct										
14.	Property/Casualty Premiums Written										
15.	Health Premiums Earned	330,773,287								330,773,287	
16.	Property/Casualty Premiums Earned										
17.	Amount Paid for Provision of Health Care Services	259,713,012								259,713,012	
18.	Amount Incurred for Provision of Health Care Services	273,737,981								273,737,981	

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0.
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0

30 Grand Total

SCHEDULE A - VERIFICATION BETWEEN YEARS
Real Estate

1.	Book/adjusted carrying value, December 31, prior year	
2.	Increase (decrease) by adjustment:	
2.1	Totals, Part 1, Column 11	
2.2	Totals, Part 3, Column 8	
3.	Cost of acquired, (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9))	
4.	Cost of additions and permanent improvements:	
4.1	Totals, Part 1, Column 14	
4.2	Totals, Part 3, Column 10	
5.	Total profit (loss) on sales, Part 3, Column 15	
6.	Increase (decrease) by foreign exchange adjustment	
6.1	Totals, Part 1, Column 12	
6.2	Totals, Part 3, Column 9	
7.	Amounts received on sales, Part 3, Column 12 and Part 1, Column 13	
8.	Book/adjusted carrying value at the end of current period	
9.	Total valuation allowance	
10.	Subtotal (Lines 8 plus 9)	
11.	Total nonadmitted amounts	
12.	Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)	

SCHEDULE B - VERIFICATION BETWEEN YEARS
Mortgage Loans

1.	Book value/recorded investment excluding accrued interest on mortgages owned, December 31 of prior year	
2.	Amount loaned during year:	
2.1	Actual cost at time of acquisitions	
2.2	Additional investment made after acquisitions	
3.	Accrual of discount and mortgage interest points and commitment fees	
4.	Increase (decrease) by adjustment	
5.	Total profit (loss) on sale	
6.	Amounts paid on account or in full during the year	
7.	Amortization of premium	
8.	Increase (decrease) by foreign exchange adjustment	
9.	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period	
10.	Total valuation allowance	
11.	Subtotal (Lines 9 plus 10)	
12.	Total nonadmitted amounts	
13.	Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column)	

SCHEDULE BA - VERIFICATION BETWEEN YEARS
Long-Term Invested Assets

1.	Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	7,854,291
2.	Cost of acquisitions during year:	
2.1	Actual cost at time of acquisitions	
2.2	Additional investment made after acquisitions	265,000
3.	Accrual of discount	
4.	Increase (decrease) by adjustment	(12,489)
5.	Total profit (loss) on sale	2,735,500
6.	Amounts paid on account or in full during the year	3,735,500
7.	Amortization of premium	
8.	Increase (decrease) by foreign exchange adjustment	
9.	Book/adjusted carrying value of long-term invested assets at end of current period	7,106,802
10.	Total valuation allowance	
11.	Subtotal (Lines 9 plus 10)	7,106,802
12.	Total nonadmitted amounts	
13.	Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3)	7,106,802

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating Per the NAIC Designation		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1.	U.S. Governments, Schedules D & DA (Group 1)											
1.1	Class 1	364,420	1,627,574	1,044,684	632,030	29,501	3,698,209	16.03	4,307,616	20.33	3,698,209	
1.2	Class 2				126,514		126,514	0.55			126,514	
1.3	Class 3											
1.4	Class 4											
1.5	Class 5											
1.6	Class 6											
1.7	TOTALS	364,420	1,627,574	1,044,684	758,544	29,501	3,824,723	16.58	4,307,616	20.33	3,824,723	
2.	All Other Governments, Schedules D & DA (Group 2)											
2.1	Class 1											
2.2	Class 2											
2.3	Class 3											
2.4	Class 4											
2.5	Class 5											
2.6	Class 6											
2.7	TOTALS											
3.	States, Territories and Possessions etc., Guaranteed, Schedules D & DA (Group 3)											
3.1	Class 1		372,168	489,582			861,750	3.74			861,750	
3.2	Class 2											
3.3	Class 3											
3.4	Class 4											
3.5	Class 5											
3.6	Class 6											
3.7	TOTALS		372,168	489,582			861,750	3.74			861,750	
4.	Political Subdivisions of States, Territories & Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1	Class 1	203,442		851,135	422,883		1,477,460	6.41	1,550,170	7.32	1,477,460	
4.2	Class 2											
4.3	Class 3											
4.4	Class 4											
4.5	Class 5											
4.6	Class 6											
4.7	TOTALS	203,442		851,135	422,883		1,477,460	6.41	1,550,170	7.32	1,477,460	
5.	Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1	Class 1	202,477		1,747,426	1,165,006		3,114,909	13.50	3,407,559	16.08	3,114,909	
5.2	Class 2											
5.3	Class 3											
5.4	Class 4											
5.5	Class 5											
5.6	Class 6											
5.7	TOTALS	202,477		1,747,426	1,165,006		3,114,909	13.50	3,407,559	16.08	3,114,909	

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating Per the NAIC Designation		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6.	Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1	Class 1			100,000		88,925	188,925	0.82			188,925	
6.2	Class 2											
6.3	Class 3											
6.4	Class 4											
6.5	Class 5											
6.6	Class 6											
6.7	TOTALS			100,000		88,925	188,925	0.82			188,925	
7.	Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1	Class 1	10,908,818	505,604	180,966	1,145,524	576,038	13,316,950	57.73	11,919,960	56.27	13,185,983	130,966
7.2	Class 2			94,209	12,386	174,877	281,472	1.22			152,655	128,817
7.3	Class 3											
7.4	Class 4											
7.5	Class 5											
7.6	Class 6											
7.7	TOTALS	10,908,818	505,604	275,175	1,157,910	750,915	13,598,422	58.95	11,919,960	56.27	13,338,638	259,783
8.	Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1	Class 1											
8.2	Class 2											
8.3	Class 3											
8.4	Class 4											
8.5	Class 5											
8.6	Class 6											
8.7	TOTALS											
9.	Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1	Class 1											
9.2	Class 2											
9.3	Class 3											
9.4	Class 4											
9.5	Class 5											
9.6	Class 6											
9.7	TOTALS											

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating Per the NAIC Designation		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. Total Bonds Current Year												
10.1	Class 1	11,679,157	2,505,346	4,413,793	3,365,443	694,464	22,658,203	98.23	X X X	X X X	22,527,236	130,966
10.2	Class 2			94,209	12,386	174,877	281,472	1.22	X X X	X X X	152,655	128,817
10.3	Class 3				126,514		126,514	0.55	X X X	X X X	126,514	
10.4	Class 4								X X X	X X X		
10.5	Class 5						(c)		X X X	X X X		
10.6	Class 6						(c)		X X X	X X X		
10.7	TOTALS	11,679,157	2,505,346	4,508,002	3,504,343	869,341	(b) 23,066,189	100.00	X X X	X X X	22,806,405	259,783
10.8	Line 10.7 as a % of Column 6	50.63	10.86	19.54	15.19	3.77	100.00	X X X	X X X	X X X	98.87	1.13
11. Total Bonds Prior Year												
11.1	Class 1	10,567,229	3,780,687	4,991,481	1,448,103	397,801	X X X	X X X	21,185,301	100.00	21,185,301	
11.2	Class 2						X X X	X X X				
11.3	Class 3						X X X	X X X				
11.4	Class 4						X X X	X X X				
11.5	Class 5						X X X	X X X	(c)			
11.6	Class 6						X X X	X X X	(c)			
11.7	TOTALS	10,567,229	3,780,687	4,991,481	1,448,103	397,801	X X X	X X X	(b) 21,185,301	100.00	21,185,301	
11.8	Line 11.7 as a % of Col. 8	49.88	17.85	23.56	6.84	1.88	X X X	X X X	100.00	X X X	100.00	
12. Total Publicly Traded Bonds												
12.1	Class 1	11,679,158	2,505,346	4,282,827	3,365,442	694,464	22,527,237	97.66	21,185,301	100.00	22,527,237	X X X
12.2	Class 2			94,209	12,386	46,060	152,655	0.66			152,655	X X X
12.3	Class 3				126,514		126,514	0.55			126,514	X X X
12.4	Class 4											X X X
12.5	Class 5											X X X
12.6	Class 6											X X X
12.7	TOTALS	11,679,158	2,505,346	4,377,036	3,504,342	740,524	22,806,406	98.87	21,185,301	100.00	22,806,406	X X X
12.8	Line 12.7 as a % of Col. 6	51.21	10.99	19.19	15.37	3.25	100.00	X X X	X X X	X X X	100.00	X X X
12.9	Line 12.7 as a % of Line 10.7, Col. 6, Section 10	50.63	10.86	18.98	15.19	3.21	98.87	X X X	X X X	X X X	98.87	X X X
13. Total Privately Placed Bonds												
13.1	Class 1			130,966			130,966	0.57			X X X	130,966
13.2	Class 2					128,817	128,817	0.56			X X X	128,817
13.3	Class 3										X X X	
13.4	Class 4										X X X	
13.5	Class 5										X X X	
13.6	Class 6										X X X	
13.7	TOTALS			130,966		128,817	259,783	1.13			X X X	259,783
13.8	Line 13.7 as a % of Col. 6			50.41		49.59	100.00	X X X	X X X	X X X	X X X	100.00
13.9	Line 13.7 as a % of Line 10.7, Col. 6, Section 10			0.57		0.56	1.13	X X X	X X X	X X X	X X X	1.13

(a) Includes \$.....0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
(b) Includes \$.....0 current year, \$.....0 prior year of bonds with Z designations and \$.....0 current year, \$.....0 prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class is under regulatory review.
(c) Includes \$.....0 current year, \$.....0 prior year of bonds with 5* designations and \$.....0 current year, \$.....0 prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1.	U.S. Governments, Schedules D & DA (Group 1)											
1.1	Issuer Obligations	299,988	1,043,363	250,127	126,514		1,719,992	7.32	1,996,401	9.42	1,719,993	
1.2	Single Class Mortgage-Backed/Asset-Backed Securities	64,432	584,211	794,557	632,030	29,501	2,104,731	8.96	2,311,215	10.91	2,104,731	
1.7	TOTALS	364,420	1,627,574	1,044,684	758,544	29,501	3,824,723	16.29	4,307,616	20.33	3,824,724	
2.	All Other Governments, Schedules D & DA (Group 2)											
2.1	Issuer Obligations											
2.2	Single Class Mortgage-Backed/Asset-Backed Securities											
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
2.3	Defined											
2.4	Other											
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
2.5	Defined											
2.6	Other											
2.7	TOTALS											
3.	States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 3)											
3.1	Issuer Obligations		372,168	489,582			861,750	3.67			861,750	
3.2	Single Class Mortgage-Backed/Asset-Backed Securities											
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
3.3	Defined											
3.4	Other											
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
3.5	Defined											
3.6	Other											
3.7	TOTALS		372,168	489,582			861,750	3.67			861,750	
4.	Political Subdivisions of States, Territories & Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1	Issuer Obligations	203,442		851,135	422,883		1,477,460	6.29	1,550,170	7.32	1,477,460	
4.2	Single Class Mortgage-Backed/Asset-Backed Securities											
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
4.3	Defined											
4.4	Other											
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
4.5	Defined											
4.6	Other											
4.7	TOTALS	203,442		851,135	422,883		1,477,460	6.29	1,550,170	7.32	1,477,460	
5.	Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, SCH. D & DA (Group 5)											
5.1	Issuer Obligations	202,477		1,747,426	1,165,006		3,114,909	13.26	3,407,559	16.08	3,114,909	
5.2	Single Class Mortgage-Backed/Asset-Backed Securities											
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
5.3	Defined											
5.4	Other											
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
5.5	Defined											
5.6	Other											
5.7	TOTALS	202,477		1,747,426	1,165,006		3,114,909	13.26	3,407,559	16.08	3,114,909	

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6.	Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1	Issuer Obligations			100,000		88,925	188,925	0.80			188,925	
6.2	Single Class Mortgage-Backed/Asset-Backed Securities											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:												
6.3	Defined											
6.4	Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:												
6.5	Defined											
6.6	Other											
6.7	TOTALS			100,000		88,925	188,925	0.80			188,925	
7.	Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1	Issuer Obligations	10,908,818	546,345	401,088	1,157,910	1,002,573	14,016,734	59.69	11,919,954	56.27	13,634,889	381,843
7.2	Single Class Mortgage-Backed/Asset-Backed Securities											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:												
7.3	Defined											
7.4	Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:												
7.5	Defined											
7.6	Other											
7.7	TOTALS	10,908,818	546,345	401,088	1,157,910	1,002,573	14,016,734	59.69	11,919,954	56.27	13,634,889	381,843
8.	Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1	Issuer Obligations											
8.7	TOTALS											
9.	Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1	Issuer Obligations											
9.2	Single Class Mortgage-Backed/Asset-Backed Securities											
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:												
9.3	Defined											
9.4	Other											
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:												
9.5	Defined											
9.6	Other											
9.7	TOTALS											

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
10.	Total Bonds Current Year											
10.1	Issuer Obligations	11,614,725	1,961,876	3,839,358	2,872,313	1,091,498	21,379,770	91.04	X X X	X X X	20,997,926	381,843
10.2	Single Class Mortgage-Backed/Asset-Backed Securities	64,432	584,211	794,557	632,030	29,501	2,104,731	8.96	X X X	X X X	2,104,731	
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
10.3	Defined								X X X	X X X		
10.4	Other								X X X	X X X		
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
10.5	Defined								X X X	X X X		
10.6	Other								X X X	X X X		
10.7	TOTALS	11,679,157	2,546,087	4,633,915	3,504,343	1,120,999	23,484,501	100.00	X X X	X X X	23,102,657	381,843
10.8	Line 10.7 as a % of Column 6	49.73	10.84	19.73	14.92	4.77	100.00	X X X	X X X	X X X	98.37	1.63
11.	Total Bonds Prior Year											
11.1	Issuer Obligations	10,383,637	3,235,428	4,239,929	669,395	345,696	X X X	X X X	18,874,085	89.09	18,874,085	
11.2	Single Class Mortgage-Backed/Asset-Backed Securities	183,592	545,258	751,552	778,707	52,105	X X X	X X X	2,311,214	10.91	2,311,215	
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
11.3	Defined						X X X	X X X				
11.4	Other						X X X	X X X				
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
11.5	Defined						X X X	X X X				
11.6	Other						X X X	X X X				
11.7	TOTALS	10,567,229	3,780,686	4,991,481	1,448,102	397,801	X X X	X X X	21,185,299	100.00	21,185,300	
11.8	Line 11.7 as a % of Column 8	49.88	17.85	23.56	6.84	1.88	X X X	X X X	100.00	X X X	100.00	
12.	Total Publicly Traded Bonds											
12.1	Issuer Obligations	11,614,726	1,961,876	3,708,391	2,872,213	840,620	20,997,826	89.41	18,874,085	89.09	20,997,826	X X X
12.2	Single Class Mortgage-Backed/Asset-Backed Securities	64,432	584,211	794,557	632,030	29,501	2,104,731	8.96	2,311,215	10.91	2,104,731	X X X
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
12.3	Defined											X X X
12.4	Other											X X X
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
12.5	Defined											X X X
12.6	Other											X X X
12.7	TOTALS	11,679,158	2,546,087	4,502,948	3,504,243	870,121	23,102,557	98.37	21,185,300	100.00	23,102,557	X X X
12.8	Line 12.7 as a % of Column 6	50.55	11.02	19.49	15.17	3.77	100.00	X X X	X X X	X X X	100.00	X X X
12.9	Line 12.7 as a % of Line 10.7, Column 6, Section 10	49.73	10.84	19.17	14.92	3.71	98.37	X X X	X X X	X X X	98.37	X X X
13.	Total Privately Placed Bonds											
13.1	Issuer Obligations			130,966		250,877	381,843	1.63			X X X	381,843
13.2	Single Class Mortgage-Backed/Asset-Backed Securities										X X X	
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
13.3	Defined										X X X	
13.4	Other										X X X	
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES:											
13.5	Defined										X X X	
13.6	Other										X X X	
13.7	TOTALS			130,966		250,877	381,843	1.63			X X X	381,843
13.8	Line 13.7 as a % of Column 6			34.30		65.70	100.00	X X X	X X X	X X X	X X X	100.00
13.9	Line 13.7 as a % of Line 10.7, Column 6, Section 10			0.56		1.07	1.63	X X X	X X X	X X X	X X X	1.63

SCHEDULE DA - PART 2
Verification of SHORT-TERM INVESTMENTS Between Years

		1	2	3	4	5
		Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1.	Book/adjusted carrying value, December 31 of prior year	10,000,000	10,000,000			
2.	Cost of short-term investments acquired					
3.	Increase (decrease) by adjustment					
4.	Increase (decrease) by foreign exchange adjustment					
5.	Total profit (loss) on disposal of short-term investments					
6.	Consideration received on disposal of short-term investments					
7.	Book/adjusted carrying value, current year	10,000,000	10,000,000			
8.	Total valuation allowance					
9.	Subtotal (Lines 7 plus 8)	10,000,000	10,000,000			
10.	Total nonadmitted amounts					
11.	Statement value (Lines 9 minus 10)	10,000,000	10,000,000			
12.	Income collected during year	379,214	379,214			
13.	Income earned during year	379,214	379,214			

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

40 Schedule DB Part A Verification NONE

40 Schedule DB Part B Verification NONE

41 Schedule DB Part C Verification NONE

41 Schedule DB Part D Verification NONE

41 Schedule DB Part E Verification NONE

42 Schedule DB Part F Sn 1 - Sum Replicated Assets NONE

43 Schedule DB Part F Sn 2 - Recon Replicated Assets NONE

44 Schedule S - Part 1 - Section 2 NONE

45 Schedule S - Part 2 NONE

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	Outstanding Surplus Relief		12	13
									10	11		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Location	Type	Premiums	Unearned Premiums (estimated)	Reserve Credit Taken Other than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
Authorized General Account - Affiliates												
67105 ...	41-0451140 ...	08/01/1999	RELIASTAR LIFE INS CO	Minneapolis, Minnesota	SSL/A/I	617,217	.....	.....	.....	.....	.....	.....
0199999 Subtotal - Authorized General Account - Affiliates						617,217	.....	.....	.....	.....	.....	.....
0399999 Total - Authorized General Account						617,217	.....	.....	.....	.....	.....	.....
0799999 Total - Authorized and Unauthorized General Account						617,217	.....	.....	.....	.....	.....	.....
1599999 Totals						617,217	.....	.....	.....	.....	.....	.....

SCHEDULE S - PART 4
Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Totals (Cols. 5 + 6 + 7)	Letters of Credit	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9+10+11+12+13 But Not in Excess of Col. 8
				NONE									
1199999 Totals (General Account and Separate Accounts combined) .....				.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

SCHEDULE S - PART 5
Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2007	2 2006	3 2005	4 2004	5 2003
A. OPERATIONS ITEMS					
1. Premiums					
2. Title XVIII-Medicare					
3. Title XIX - Medicaid	617	669	583	550	521
4. Commissions and reinsurance expense allowance					
5. Total hospital and medical expenses					
B. BALANCE SHEET ITEMS					
6. Premiums receivable					
7. Claims payable					
8. Reinsurance recoverable on paid losses					
9. Experience rating refunds due or unpaid					
10. Commissions and reinsurance expense allowances unpaid					
11. Unauthorized reinsurance offset					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F)					
13. Letters of credit (L)					
14. Trust agreements (T)					
15. Other (O)					

SCHEDULE S - PART 6
Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 10)	70,897,133		70,897,133
2. Accident and health premiums due and unpaid (Line 13)			
3. Amounts recoverable from reinsurers (Line 14.1)			
4. Net credit for ceded reinsurance	X X X		
5. All other admitted assets (Balance)	2,782,637		2,782,637
6. Total assets (Line 26)	73,679,770		73,679,770
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	30,684,245		30,684,245
8. Accrued medical incentive pool and bonus payments (Line 2)	1,629,743		1,629,743
9. Premiums received in advance (Line 8)			
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 17)			
11. Reinsurance in unauthorized companies (Line 18)			
12. All other liabilities (Balance)	4,097,761		4,097,761
13. Total liabilities (Line 22)	36,411,749		36,411,749
14. Total capital and surplus (Line 31)	37,268,021	X X X	37,268,021
15. Total liabilities, capital and surplus (Line 32)	73,679,770		73,679,770
NET CREDIT FOR CEDED REINSURANCE			
16. Claims unpaid			
17. Accrued medical incentive pool			
18. Premiums received in advance			
19. Reinsurance recoverable on paid losses			
20. Other ceded reinsurance recoverables			
21. Total ceded reinsurance recoverables			
22. Premiums receivable			
23. Funds held under reinsurance treaties with authorized and unauthorized reinsurers ...			
24. Unauthorized reinsurance			
25. Other ceded reinsurance payables/offsets			
26. Total ceded reinsurance payables/offsets			
27. Total net credit for ceded reinsurance			

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

Direct Business only						
States, Etc.	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama (AL)						
2. Alaska (AK)						
3. Arizona (AZ)						
4. Arkansas (AR)						
5. California (CA)						
6. Colorado (CO)						
7. Connecticut (CT)						
8. Delaware (DE)						
9. District of Columbia (DC)						
10. Florida (FL)						
11. Georgia (GA)						
12. Hawaii (HI)						
13. Idaho (ID)						
14. Illinois (IL)						
15. Indiana (IN)						
16. Iowa (IA)						
17. Kansas (KS)						
18. Kentucky (KY)						
19. Louisiana (LA)						
20. Maine (ME)						
21. Maryland (MD)						
22. Massachusetts (MA)						
23. Michigan (MI)						
24. Minnesota (MN)						
25. Mississippi (MS)						
26. Missouri (MO)						
27. Montana (MT)						
28. Nebraska (NE)						
29. Nevada (NV)						
30. New Hampshire (NH)						
31. New Jersey (NJ)						
32. New Mexico (NM)						
33. New York (NY)						
34. North Carolina (NC)						
35. North Dakota (ND)						
36. Ohio (OH)						
37. Oklahoma (OK)						
38. Oregon (OR)						
39. Pennsylvania (PA)						
40. Rhode Island (RI)						
41. South Carolina (SC)						
42. South Dakota (SD)						
43. Tennessee (TN)						
44. Texas (TX)						
45. Utah (UT)						
46. Vermont (VT)						
47. Virginia (VA)						
48. Washington (WA)						
49. West Virginia (WV)						
50. Wisconsin (WI)						
51. Wyoming (WY)						
52. American Samoa (AS)						
53. Guam (GU)						
54. Puerto Rico (PR)						
55. U.S. Virgin Islands (VI)						
56. Northern Mariana Islands (MP)						
57. Canada (CN)						
58. Aggregate other alien (OT)						
59. TOTALS						

SCHEDULE Y (Continued)
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/(Disburse- ments) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
.. 52563 ..	.. 38-3253977 ..	HEALTH PLAN OF MI INC .....	.. (6,035,000) ..	.....	.....	.....	.. (24,857,995) ..	.....	.....	.....	.. (30,892,995) ..	.....
.....	.. 52-2422207 ..	CAIDAN ENTERPRISES INC .....	..... 6,035,000 ..	.....	.....	.....	.....	.....	.....	.....	..... 6,035,000 ..	.....
.....	.. 36-4559356 ..	CAIDAN MANAGEMENT COMPANY .....	.....	.....	.....	.....	..... 24,857,995 ..	.....	.....	.....	..... 24,857,995 ..	.....
9999999 Totals .....			.....	.....	.....	.....	..... 0 ..	.....	X X X	.....	..... 0 ..	.....

Schedule Y Part 2 Explanation: During 2007, Health Plan of Michigan, Inc. declared dividends and paid dividends to Caidan Enterprises, Inc. The dividend payment was approved by the Michigan Office of Financial and Insurance Services

SUPPLEMENTAL EXHIBITS AND SCHEDULES
INTERROGATORIES

Response

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?

Yes
2. Will an actuarial opinion be filed by March 1?

Yes
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?

Yes
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?

Yes

APRIL FILING

5. Will Management's Discussion and Analysis be filed by April 1?

Yes
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?

Yes
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?

Yes

JUNE FILING

8. Will an audited financial report be filed by June 1?

Yes

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but it is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

9. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?

No
10. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?

No
11. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?

No
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?

No
13. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?

No

APRIL FILING

14. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?

No
15. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?

No
16. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?

No

Explanations:

Bar Codes:

Medicare Supplement Insurance Experience Exhibit



Health Life Supplement



Health Property / Casualty Supplement



Schedule SIS



Medicare Part D Coverage Supplement



LTC Experience Reporting Form C



Health Life Supplement - LHA Guaranty Association Reconciliation



Health Property / Casualty Supplement



ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols.1-2)	Net Admitted Assets
2304. Pre-Paid Expenses
2397. Summary of remaining write-ins for Line 23 (Lines 2304 through 2396)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2
	Current Year	Prior Year
4704. 0
4705.
4706. Repurchase of Stock
4707. 0
4708. 0
4709. 0
4710. 0
4797. Summary of remaining write-ins for Line 47 (Lines 4704 through 4796)

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
2304. Pre-Paid Expenses	856	856
2397. Summary of remaining write-ins for Line 23 (Lines 2304 through 2396)	856	856



52563200736500000

Medicare Part D Coverage Supplement
(Net of Reinsurance)
(To be Filed By March 1)

NAIC Group Code:

NAIC Company Code: 52563

		Individual Coverage		Group Coverage		5 Total Cash
		1	2	3	4	
		Insured	Uninsured	Insured	Uninsured	
1.	Premiums Collected					
1.1	Standard Coverage					
1.11	With Reinsurance Coverage		X X X		X X X	
1.12	Without Reinsurance Coverage		X X X		X X X	
1.13	Risk-Corridor Payment Adjustments		X X X		X X X	
1.2	Supplemental Benefits		X X X		X X X	
2.	Premiums Due and Uncollected - change					
2.1	Standard Coverage					
2.11	With Reinsurance Coverage		X X X		X X X	X X X
2.12	Without Reinsurance Coverage		X X X		X X X	X X X
2.2	Supplemental Benefits		X X X		X X X	X X X
3.	Unearned Premium and Advance Premium - change					
3.1	Standard Coverage					
3.11	With Reinsurance Coverage		X X X		X X X	X X X
3.12	Without Reinsurance Coverage		X X X		X X X	X X X
3.2	Supplemental Benefits		X X X		X X X	X X X
4.	Risk-Corridor Payment Adjustments - change					
4.1	Receivable		X X X		X X X	X X X
4.2	Payable		X X X		X X X	X X X
5.	Earned Premiums					
5.1	Standard Coverage					
5.11	With Reinsurance Coverage		X X X		X X X	X X X
5.12	Without Reinsurance Coverage		X X X		X X X	X X X
5.13	Risk-Corridor Payment Adjustments		X X X		X X X	X X X
5.2	Supplemental Benefits		X X X		X X X	X X X
6.	Total Premiums		X X X		X X X	
7.	Claims Paid					
7.1	Standard Coverage	N O N E				
7.11	With Reinsurance Coverage				X X X	
7.12	Without Reinsurance Coverage				X X X	
7.2	Supplemental Benefits				X X X	
8.	Claim Reserves and Liabilities - change					
8.1	Standard Coverage					
8.11	With Reinsurance Coverage		X X X		X X X	X X X
8.12	Without Reinsurance Coverage		X X X		X X X	X X X
8.2	Supplemental Benefits		X X X		X X X	X X X
9.	Healthcare Receivables - change					
9.1	Standard Coverage					
9.11	With Reinsurance Coverage		X X X		X X X	X X X
9.12	Without Reinsurance Coverage		X X X		X X X	X X X
9.2	Supplemental Benefits		X X X		X X X	X X X
10.	Claims Incurred					
10.1	Standard Coverage					
10.11	With Reinsurance Coverage		X X X		X X X	X X X
10.12	Without Reinsurance Coverage		X X X		X X X	X X X
10.2	Supplemental Benefits		X X X		X X X	X X X
11.	Total Claims		X X X		X X X	
12.	Reinsurance Coverage and Low Income Cost Sharing					
12.1	Claims Paid - net to reimbursements applied	X X X		X X X		
12.2	Reimbursements Received but Not Applied - change	X X X		X X X		
12.3	Reimbursements Receivable - change	X X X		X X X		X X X
12.4	Healthcare Receivables - change	X X X		X X X		X X X
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14.	Expenses Paid		X X X		X X X	
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16.	Underwriting Gain/Loss		X X X		X X X	X X X
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